

EXHIBIT

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Form	1040	Department of the Treasury-Internal Revenue Service U.S. Individual Income Tax Return	2022	OMB No. 1545-0074	IRS Use Only-Do not write or staple in this space.
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Filing Status ☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying surviving spouse (QSS)
 Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent.

Your first name and middle initial TIM	Last name DESROCHERS	Your social security number REDACTED
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.
1401 LAVACA STREET
 City, town, or post office. If you have a foreign address, also complete spaces below.
AUSTIN

Apt. no. 242	State TX	ZIP code 78701	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
Foreign country name		Foreign province/state/county	Foreign postal code

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☒ Yes ☐ No

Standard Deduction Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: ☐ Were born before January 2, 1958 ☐ Are blind Spouse: ☐ Was born before January 2, 1958 ☐ Is blind

Dependents	(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check if qualifies for (see instructions):	Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here <input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

Income

1a Total amount from Form(s) W-2, box 1 (see instructions)	1a	REDACTED
b Household employee wages not reported on Form(s) W-2	1b	
c Tip income not reported on line 1a (see instructions)	1c	
d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d	
e Taxable dependent care benefits from Form 2441, line 26	1e	
f Employer-provided adoption benefits from Form 8839, line 29	1f	
g Wages from Form 8919, line 6	1g	
h Other earned income (see instructions)	1h	
i Nontaxable combat pay election (see instructions) 1i		
z Add lines 1a through 1h	1z	REDACTED

2a Tax-exempt interest	2a	REDACTED	b Taxable interest	2b	REDACTED
3a Qualified dividends	3a	REDACTED	b Ordinary dividends	3b	REDACTED
4a IRA distributions	4a		b Taxable amount	4b	
5a Pensions and annuities	5a		b Taxable amount	5b	
6a Social security benefits	6a		b Taxable amount	6b	
c If you elect to use the lump-sum election method, check here (see instructions) <input type="checkbox"/>					
7 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	7	REDACTED			
8 Other income from Schedule 1, line 10	8	REDACTED			
9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income	9	REDACTED			
10 Adjustments to income from Schedule 1, line 26	10				
11 Subtract line 10 from line 9. This is your adjusted gross income	11	REDACTED			
12 Standard deduction or itemized deductions (from Schedule A)	12	REDACTED			
13 Qualified business income deduction from Form 8995 or Form 8995-A	13	REDACTED			
14 Add lines 12 and 13	14	REDACTED			
15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income	15	REDACTED			

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a Form W-2, see instructions.

Attach Sch. B if required.

Standard Deduction for-

- Single or Married filing separately, \$12,950
- Married filing jointly or Qualifying surviving spouse, \$25,900
- Head of household, \$19,400
- If you checked any box under Standard Deduction, see instructions.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

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REDACTED

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Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____			16	REDACTED
	17	Amount from Schedule 2, line 3			17	REDACTED
	18	Add lines 16 and 17			18	REDACTED
	19	Child tax credit or credit for other dependents from Schedule 8812			19	REDACTED
	20	Amount from Schedule 3, line 8			20	REDACTED
	21	Add lines 19 and 20			21	REDACTED
	22	Subtract line 21 from line 18. If zero or less, enter -0-			22	REDACTED
	23	Other taxes, including self-employment tax, from Schedule 2, line 21			23	REDACTED
24	Add lines 22 and 23. This is your total tax .			24	REDACTED	
Payments	25	Federal income tax withheld from:			25d	REDACTED
	a	Form(s) W-2	25a	REDACTED		
	b	Form(s) 1099	25b	REDACTED		
	c	Other forms (see instructions)	25c	REDACTED		
	d	Add lines 25a through 25c	25d	REDACTED		
	26	2022 estimated tax payments and amount applied from 2021 return			26	REDACTED
	27	Earned income credit (EIC)	27	REDACTED		
	28	Additional child tax credit from Schedule 8812	28	REDACTED		
	29	American opportunity credit from Form 8863, line 8	29	REDACTED		
	30	Reserved for future use	30	REDACTED		
	31	Amount from Schedule 3, line 15	31	REDACTED		
32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits .			32	REDACTED	
33	Add lines 25d, 26, and 32. These are your total payments .			33	REDACTED	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid .			34	REDACTED
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here. <input type="checkbox"/>			35a	REDACTED
	b	Routing number	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings			
	d	Account number				
36	Amount of line 34 you want applied to your 2023 estimated tax .			36	REDACTED	
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions.			37	REDACTED
	38	Estimated tax penalty (see instructions)			38	REDACTED

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions ☐ Yes. Complete below. ☒ No

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature 29322	Date 04-17-2023	Your occupation SALES	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) _____
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) _____
Phone no. 706-206-1323		Email address TIM.J.DESROCHERS@OUTLOOK.COM	

Paid Preparer Use Only

Preparer's signature REDACTED	Date 04-17-2023	PTIN REDACTED	Check if: <input type="checkbox"/> Self-employed
Preparer's name REDACTED	Phone no. REDACTED		
Firm's name REDACTED			
Firm's address REDACTED UT REDACTED	Firm's EIN REDACTED		

Go to www.irs.gov/Form1040 for instructions and the latest information.

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